

# MULTIPLE DEPENDENT LAIM FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4	1					
5						
6	1					
7	1					
8		1				
9	1					
10	1					
11	1					
12		1				
13	1					
14		1				
15		8				
16		8				
17		8				
18		8				
19		8				
20		8				
21	1					
22		1				
23	1					
24	1					
25		1				
26	1					
27	1					
28	1					
29		1				
30	1					
31		1				
32		7				
33		7				
34		7				
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45						
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48						
49						
50						
TOTAL IND.	15					
TOTAL DEP.						
TOTAL CLAIMS	108					

	IND	DEP	IND	DEP	IND	DEP
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52						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						